REST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

9/660195

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY | | | OTHER | |
|--|--|------------------------------|--------------------|----------------|--|--|------------|-------------------------|------------------------|----------|---------------------|------------------------|
| FOR | | | | olumn 1) | | olumn 2) R EXTRA | 7 - | TYPE | | OR | SMALL | <u> </u> |
| FOR | | | NUMBE | R FILED | NOMBE | IN EXTINA | . | RATE | FEE | | RATE | FEE |
| BASIC FEE | | X | | | | | | | 345.00 | OR | | 690.00 |
| TOTAL CLAIMS | | | | j9 minus 2 | !O= • | | | X\$ 9= | | OR | X\$18= | |
| INDEPENDENT CLAIMS | | | • | 2 minus | 3 = | |] [| X39= | | OR | X78= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | Jſ | +130= | | OR | +260= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | ÖЯ | TOTAL | 690 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | OTHER THAN SMALL ENTITY | | | | |
| AMENDMENT A | | CLA REMAI AFT AMEND | NING ' | | HIGHEST NUMBER PREVIOUSL PAID FOR | Y PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | 2 | J | Minus | - 20 | - / | | X\$ 9= | | OR | X\$18= | 18.00 |
| | Independent | • 8 |) | Minus | ··· 3 | | 1 | X39= | | OR | X78= | •. |
| | FIRST PRESE | NIATION | OF MU | JLTIPLE DEF | 'ENDENT GLA | · · | J [| +130= | • | OR | +260= | |
| | | • | | , | | 6-17-04 | | YOTAL DDIT, FEE | | OR | TOTAL ADDIT, FEE | 18100 |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AMENDMENT B | | | IMS INING ER | | HIGHEST NUMBER PREVIOUSL PAID FOR | PRESENT | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . 34 | + | Minus | · 21 | = 13 |] [| X\$ 9= | | OR | X\$18= | 234.W |
| | Independent | • 3 | <u> </u> | Minus | -3 | |] [| X39= | | OR | X78= | , |
| | FIRST PRESE | NTATIO | N OF MU | JLTIPLE DEF | ENDENT CL | AIM | ┛╏ | +130= | | OR | +260= | |
| | | ÷ | | | • | | L | TOTAL | | OR | TOTAL | 834,00 |
| | | | | | | | A | DDIT. FEE | | lou | ADDIT. FEE | X29/0U |
| Ŀ. | · · · · · · · · · · · · · · · · · · · | (Colu | | | (Column 2 | (Column 3 | <u> </u> | | | | ٠ | |
| AMENDMENT C | | CLA REMA AFT AMENO | INING TER | | HIGHEST NUMBER PREVIOUSL PAID FOR | | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | | Minus | ** | = |] [| X\$ 9= | | OR | X\$18= | |
| | Independent | • | | Minus | *** | = |] | X39= | | OR | X78= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | |
| | | | | | | , | · [| +130= | | OR | +260= | |
| | If the entry in colu If the "Highest Nu | mhar Prav | Acusty Pa | aid For IN THI | S SPACE is lesi | s than 20, enter "20 | 0." _ | TOTAL DOIT. FEE | | OR | TOTAL ADDIT. FEE | |
| ••• | If the Stichoot Mu | mher Pres | viously Pr | aid For" IN TH | IS SPACE is les | s than 3, enter "3." s the highest numl | • | | propriate bo | x In, co | | |